

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/537575

## CLAIMS AS FILED - PART I

|                                  | (Column 1)  | (Column 2)                             |
|----------------------------------|---|--|
| U.S. NATIONAL STAGE FEES         |   |  |
| BASIC FEE                        | SMALL ENT. = \$ 150   | LARGE ENT. = \$ 300                    |
| EXAMINATION FEE                  | Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100                      | All other situations = \$ 100 / \$ 200 |
| SEARCH FEE                       | U.S. is ISA = \$ 50 / \$ 100<br>All other countries = \$ 200 / \$ 400 | All other situations = \$ 250 / \$ 500 |
| FEE FOR EXTRA SPEC. PGS.         | minus 100 =   | / 50 =                                 |
| TOTAL CHARGEABLE CLAIMS          | 20 minus 20 =   |  |
| INDEPENDENT CLAIMS               | 3 minus 3 =   |  |
| MULTIPLE DEPENDENT CLAIM PRESENT |   | <input type="checkbox"/>               |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE       | FEE |
|------------|-----|
| BASIC FEE  |     |
| EXAM. FEE  |     |
| SEARCH FEE |     |
| X \$ 125 = |     |
| X \$ 25 =  |     |
| X \$ 100 = |     |
| + \$ 180 = |     |
| TOTAL      |     |

| RATE       | FEE |
|------------|-----|
| BASIC FEE  | 300 |
| EXAM. FEE  | 200 |
| SEARCH FEE | 400 |
| X \$ 250 = |     |
| X \$ 50 =  |     |
| X \$ 200 = |     |
| + \$ 360 = |     |
| TOTAL      | 900 |

## CLAIMS AS AMENDED - PART II

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A                                    | 65 JUNE 05                       |                                    |                          |
|  | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  | 20                               | 20                                 |                          |
| Independent                                    | 3                                | 3                                  |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 =        |                |
| X \$ 200 =       |                |
| + \$ 360 =       |                |
| TOTAL ADDIT. FEE |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)               |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B                                    |                                  |                                    |                          |
|  | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA            |
| Total  |                                  |                                    |                          |
| Independent                                    |                                  |                                    |                          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                    | <input type="checkbox"/> |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 =        |                |
| X \$ 100 =       |                |
| + \$ 180 =       |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 =        |                |
| X \$ 200 =       |                |
| + \$ 360 =       |                |
| TOTAL ADDIT. FEE |                |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.